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CERTIFICATE OF FACSIMILE TRANSMISSION TO THE UNITED STATES PATENT AND TRADEMARK OFFICE

Date: May 20, 2003

RE: U.S. Patent Application

Examiner: William Wayner Art Unit: 3744

Serial No.: 09/681,929

MAY 2 0 2003

FAX RECEIVED

Fax: (703) 872-9302

Applicant: George Mazereeuw

GROUP 3700

From: Thomas M. Fisher

Atty. Dkt. No.: 03DV-9050

DOCUMENTS SUBMITTED WITH TRANSMISSION: Amendment Transmittal (3 pgs.); Amendment in Response to Non-Final Office Action dated

February 20, 2003 (8 pgs.); and Submission of Marked Up Claims (2 pgs.)

Total pages including cover page: 14 If all pages are not received, please contact: Michele at Ext. 7321

RE: The above referenced U.S. Patent Application

Title: METHODS AND CONTROL UNIT FOR TEMPERATURE CONTROLLED DEVICES

Filed: June 27, 2001

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that these papers are being facsimile transmitted to the U.S. Patent and Trademark Office, Facsimile Number (703) 872-9302 on the date shown below.

Date: May 20, 2003

Thomas M. Fisher, Reg. No.: 47,564

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PATENT

Attorney Docket No.: 03DV-9050

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: George Mazereeuw

Art Unit: 3744

Serial No.: 09/681,929

Examiner: William Wayner

Filed: June 27, 2001

For:

METHODS AND CONTROL

UNIT FOR TEMPERATURE CONTROLLED DEVICES

Mail Stop: Non-Fee Amendment

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

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MAY 2 0 2003

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TRANSMITTAL

Transmitted herewith is: Amendment in response to Office Action dated February 20, 2003 (8 pgs.); Submission of Marked Up Claims (2 pgs.); and Certificate of Transmission Via Facsimile (1 pg.)

STATUS

Applicant

claims small entity status. is other than a small entity.

CERTIFICATE OF MAILING/TRANSMISSION

I hereby certify that this correspondence is, on the date shown below, being:

MAILING

deposited with the United States Postal Service with sufficient postage as Express Mail, in an envelope addressed to the Commissioner for Patents, Washington, D.C. 20231

Date: May 20, 2003

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Trademark Office

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Thomas M. Fisher Reg No. 47,564

EXTENSION OF TERM

3.	The proceedings	gs herein are for a patent application and the provisions of 37 C.F.R. 1.136									
	apply.	(complete (a) or (b), as applicable)									
	(a) Applicant petitions for an extension of time under 37 C.F.R. 1.136 (Fees: 37 C.F.R. 1.17(a)-(d) for the total number of months checked below:)										
		Extension for response within:	Other than small entity Fee	Small entity Fee (if applicable)							
		first month	\$ 110.00	\$ 55.00							
	-	second month	\$ 400.00	\$ 200.00							
	-	third month	\$ 920.00	\$ 460.00							
	•	fourth month	\$1,440.00	\$ 720.00							
	•	fifth month	\$1,960.00	\$ 980.00							
			Fee:	\$							
If an additional extension of time is required, please consider this a petition therefor.											
(Check and complete the next item, if applicable)											
An extension of months has already been secured. The fee paid therefor \$ is deducted from the total fee due for the total months of extension now requested.											
Extension fee due with this request \$											
	OR										
	d. However, this ossibility that oetition for extension										

FEE FOR CLAIMS

The fee for claims (37 C				(Col. 2))-(α)) nas ((Col. 3)	SMALL ENTITY	OTHER THAN SMALL ENTITY					
(Col. 1) CLAIMS REMAINING AFTER AMENDMENT				HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	ADDITIONAL. RATE FEB	OR_	ADDITIONAL RATE FEE				
TOTAL			MINUS		=	x \$9 = \$		x 518 = \$				
INDEP.	-		MINUS		=	x \$42 - \$		x \$84 = \$				
<u> </u>	FIRST	PRESEN	TATION OF	MULTIPLE DEP.	+\$130= \$		+\$280 = \$					
						TOTAL ADDITIONAL FEE S	OR	TOTAL ADDITIONAL FEE \$				
:	(a)	_	No add	litional fee fo	r Claims is	s required						
: !					OR							
(b) Total additional fee for claims required \$												
FEE PAYMENT												
5.	Attached is a check in the sum of \$											
; ,	Charge Deposit Account No. 01-2384 the sum of \$ A duplicate of this transmittal is attached.											
:	FEE DEFICIENCY											
6.	√	If any additional extension and/or fee is required, charge Deposit Account No. 01-2384.										
	AND/OR											
;	If any additional fee for claims is required, charge Deposit Account No. 01-2384.											
7.		Other	r:					. /				
					Ro Al Or St	nomas M. Fisher eg. No. 47,564 RMSTRONG TEAS ne Metropolitan Squ L Louis, MO 63102 4/621-5070						